



HINSON MIDDLE SCHOOL

TALLAHASSEE TOUR
(updated 9/9)

Nov 21, 2011

Sample Agenda

DAY 1(MON-NOV 21)

5am departure from school aboard deluxe motorcoach. Restroom break in route. Arrive in Tallahassee, meet tour guides. Guided tour through the Governor's Mansion (*if avlb*). The buses will rotate between tours. Tour the Gulf Specimen Marine Laboratory. Students will be given a 2- hour guided tour conducted by marine biologists including the aquarium and touch tanks explaining the animals and their habitats. Then they will go down to the floating docks where students in the salt marshes where students may help pull in seine nets to see what lives in this fragile eco-system. Box lunch. Travel to Wakulla Springs State Park. Enjoy a narrated boat cruise over one of the largest freshwater springs in the world along the beautiful, unspoiled Wakulla River and learn about the fragile environment of this wetland area. Transfer back to Tallahassee for dinner at the Golden Corral. See the light & musical show "tba" at the Challenger Learning Center Planetarium. Hotel check in at the Holiday Inn Capital East Hotel (850/877-3171).

{L,D}

DAY 2(TUE-NOV 22)

7:00am wake up. Hotel check out. Breakfast in the hotel. Be seated in the Florida Supreme Court Building. Special docent guides will meet the group and deliver a mock argument in the courtroom using students as the court to hear the case and the attorneys to present the arguments. Guided tour of the New Capitol Building, including stops at the House and Senate chambers and ending on the 23rd floor observation deck. Tour the Museum Of Florida History. The museum is dedicated to Florida History and also features temporary exhibits from around the world. Chic Fil A picnic lunch. Depart by 12:30pm. Return to your school by 6pm.

{B,L}

TOUR INCLUDES: Roundtrip transportation via deluxe motorcoach (air-conditioned, DVD player, & restroom); overnight lodging (Quad occupancy); night security at hotel; meals as noted; all tours and admissions; a 1:10 ratio of chaperones to students; group accidental injury insurance; background information package for trip sponsor; student study guide; tour escort from our company to handle all trip details.

TOUR PRICE : \$209 per student (quad occ)
 (based on a minimum of 35 paying students per bus)

FULL PAYMENT DUE: NOV 18

Please print only, very neatly:

STUDENT'S NAME _____ ID _____

CIVICS TEACHER _____ PERIOD _____

TALLAHASSEE TRIP GENERAL INFORMATION

1. All forms for the Tallahassee Trip must be turned into your child's civics teacher with the check or money order for full payment NO LATER than Tuesday, October 18th, 2011.

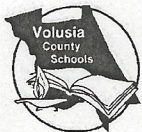
**** Forms and money will be accepted during lunch in the cafeteria on the following dates**

- Tuesday, October 4th
- Tuesday, October 18th

2. The forms and checks should be placed in the same sealed envelope. On the envelope, please PRINT your child's first name & last name, the name of his/her Civics teacher, and the period he/she has Civics.
3. We have a large number of students who are in need of partial scholarships to be able to afford to come on this trip, and only a few scholarships are available. If you or your business would like to help in this respect, by donating an extra \$100.00, please let me know as soon as possible
4. If you have any questions, kindly email me at hmhendri@volusia.k12.fl.us.

We look forward to a great trip.

Mrs. Hendricks
Mrs. Kill
Mr. French
Ms. Binford



**VOLUSIA COUNTY SCHOOLS
FIELD TRIP PARENT PERMISSION FORM
SECONDARY**

Use page 15 or page 16.

Complete the form in its entirety. It should be on file at the school/site at least five days prior to departure.

My son/daughter _____, _____ has permission to participate in
(legal name) (student ID)
Tallahassee Field Trip on November 21st & 22nd
(event) (date(s))
from 5:45 ☐ A.M. ☐ P.M. to 6:00 ☐ A.M. ☐ P.M. at Tallahassee, Florida
(address)

Cost to student is \$ 205.00.

I understand that my son/daughter will travel by:

- ☐ Activity bus ☐ District-owned vehicle ☐ School bus ☐ Private carrier/vehicle
☒ Commercial carrier - name of carrier Educational Tours

[Signature]
Signature of Sponsor

8/24/11
Date

[Signature]
Signature of Principal

Date

PARENT INFORMATION

I realize that the teacher in charge will exercise precaution for the safety of students involved in this event, and I agree to assume full responsibility for any unforeseen accident which might occur during travel or while participating in this program. I further assure that my son/daughter has been instructed to comply with the regulations of the school, teachers, sponsors, and/or chaperones who are in charge of the activity.

Note: Should the field trip be canceled for security reasons, students and their parents/guardians will incur the financial expense beyond what can be reimbursed. Should it become necessary to send my son/daughter home early from this field trip due to inappropriate behavior, I realize that I will incur the financial responsibility of this action.

Parent/Guardian Signature

Date

Home Phone Number

Emergency Phone Number

STUDENT INFORMATION

I realize that it is my responsibility to determine what school work is missed and to complete it outside of regular class time and within the time guidelines set by the teacher. I understand that the Code of Student Conduct shall be applicable for the duration of all field trips.

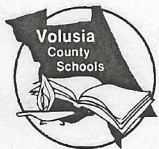
Student Signature

Date

Home Address

Teacher, this form is to be completed and in the appropriate office prior to leaving for the field trip. This field trip has been approved by the principal and/or school board. The student has the right to complete, within the teacher's time schedule, any class work missed, without penalty, due to this field trip.

Block/period	Teacher's signature	Block/period	Teacher's signature	Block/period	Teacher's signature



**VOLUSIA COUNTY SCHOOLS
SCHOOL-RELATED ACTIVITIES LIABILITY/MEDICAL WAIVER**

Use page 16 or 17.

Name of Student _____
Name of School HINSON MIDDLE
Date of Birth _____
Emergency Phone Numbers 44
Current School Year NOV, 2011
Place of Birth _____

For high school students only – I voluntarily choose to participate in one or more school-related activities during the current school year. The School-Related Activities Agreement for the above school is entirely voluntary on my part and is made with the understanding that I have not violated any of the eligibility rules and regulations of the school and Florida High School Athletics Association (FHSA).

Student's Signature _____ Date _____

PARENT/GUARDIAN INFORMATION

RELEASE WAIVER OF LIABILITY – I, the undersigned parent/guardian, give permission for the above-named student to participate in any school-related activities. I hereby release, waive, discharge and covenant not to sue the School Board of Volusia County, its directors, officers, agents and employees all for the purpose hereby referenced as “releases,” for all liability to the above-named student and/or undersigned, for any and all loss, injury, damage, and any actions, claims, demands, damages, costs or expenses therefore, which the above-named student or I may have against releases arising out of, or in any way connected with, the above-named student’s participation in any school-related activity. The insurance company that covers any medical expenses related to injuries sustained as a result of the above-named student’s participation in any school-related activity follows.

Medical Insurance Company Name _____ Policy # _____

SPECIAL HEALTH CARE INFORMATION (allergies, medications, treatments, etc.)

Parent/Guardian Signature _____ Date _____

SCHOOL: Hinson Middle School

DATE: September 7, 2011

TEACHER: Hendricks, French, Binford

Course/Grade: 7th / Civics

PARENT PERMISSION FORM for Students Viewing a "PG" or "PG-13"

Rated Video

Dear Parent/Guardian,

Students in my class have been studying LOCAL, STATE & NATIONAL
GOVERNMENT

To support this instructional unit, I plan to use a video rated PARENTAL GUIDANCE by the Motion Picture Association of America. The video title is:

ASSORTED VIDEOS DURING THE BUS RIDE TO
AND FROM TALLAHASSEE

If you grant permission for your child to view this video, please sign below .

**Your child IS NOT required to view this video

.....

** I grant for my child, _____ to view the video
listed above.

** _____
Signature of parent/guardian

** _____
Date

TOUR ENROLLMENT FORM

This form is required on overnight trips for our travel liability insurance coverage. All students, parents, chaperones, and staff must submit a Tour Enrollment Form.

Participants whose form is not in our office PRIOR to the trip departure may not be permitted to board the bus.

PARTICIPANT NAME(S): _____
PRINT ALL FAMILY PARTICIPANT NAMES HERE (***one form per family***)

SCHOOL NAME: **Hinson Middle School**
DESTINATION: **Tallahassee**
DEPARTURE DATE: **11/21/2011**

CANCELLATION POLICY

All cancellations are subject to a \$35.00 administrative fee. Cancellations up to 30 days prior to departure will be reviewed and refunded by Educational Tours with the following exceptions: pre-paid theatre, sporting events and other ticketed attractions which are non-refundable (depending upon the activity, the cost is \$15-\$75); deposits required for air travel are non-refundable (generally \$50-\$50). The cancellation fee 29 days or less is 50% of the tour price plus any pre-paid deposits. No refund will be given to those cancellations which occur within 72 hours of trip departure. In case of cancellation due to a verified sickness, injury or death in the immediate family (*sickness or injury must be verified in writing by a licensed medical practitioner*) a full refund, less the \$35.00 administration fee, will be given. Working in full consultation with the sponsoring school and teacher, Educational Tours always reserves the right to send any student home (at parent's expense) for serious rule infractions or violations of law.

RESPONSIBILITY PROVISION

Educational Tours is acting as the agent for you in the making and securing of all arrangements for transportation, sightseeing, hotel accommodations, food service or other services for the tour program. All providers of goods and/or services for the tour program are independent contractors. As a result, Educational Tours is not and shall not be responsible or liable for any negligent act, omission, willful act, or other actions of any third party and/or any person not employed by Educational Tours. Educational Tours shall not be responsible for any injury, loss or damage to person or property caused by Acts of God, Acts of Terrorism, civil unrest, or any other cause beyond the direct control of Educational Tours. You agree to hold Educational Tours, its officers, agents, and employees harmless from and against any liability for damages of any kind not caused by the direct gross negligence of Educational Tours, its agents, officers, and/or employees. You further agree to waive the right to a jury trial in any action involving Educational Tours.

I have reviewed and understand the Tour Enrollment Form.

(Parent/Guardian Signature)

(Date)

(Print Parent/Guardian Name)

PLEASE RETURN THIS FORM TO THE TRIP SPONSOR WITH YOUR FIRST PAYMENT